



**VERIFICATION FORM  
2017-2018**

**INDEPENDENT**

To receive Federal Financial Aid you are required to verify the information you reported on your application for student financial aid. Please read the instructions and answer all the questions carefully. Return this form to: **Salisbury University, 1101 Camden Avenue, Financial Aid Office, Salisbury, MD 21801.**

**A. Student Information**

(Please Print)

Student Name \_\_\_\_\_

Birth Date

Address \_\_\_\_\_

Phone #

\_\_\_\_\_

SU ID #

\_\_\_\_\_

**B. Family Household Information**

List the people in your household, include:

- yourself and your spouse if you have one, and
- your children, if you will provide more than half of their support from July 1, 2017 through June 30, 2018, and
- other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2017 through June 30, 2018. Documentation may be required.

Full Name of Household Member (see above)	Age	Relationship	Enrolled in College 2017-2018?	Name of College (attending at least half-time, in a school eligible to participate in Title IV programs and enrolled in a degree seeking or certificate program in 2017-2018)
		Self	Yes	Salisbury University

C. Student's Income Information

Independent

1.  I have already filed a 2015 U.S. Income Tax Return.

or

I am not required to file a 2015 U.S. Income Tax Return. (check box, answer a, b, or c) \*

a.  I was not employed in 2015.

b.  I was employed in 2015.

c.  I was employed in 2015 and was not issued a W-2(s). Indicate employer and explain why you were not issued a W-2(s).

Employer Name/Explanation: \_\_\_\_\_ Amount of income received: \$ \_\_\_\_\_

Employer Name/Explanation: \_\_\_\_\_ Amount of income received: \$ \_\_\_\_\_

Employer Name/Explanation: \_\_\_\_\_ Amount of income received: \$ \_\_\_\_\_

2.  I/my spouse **did not pay, was not required** to pay child support in 2015.

I/my spouse **PAID** child support in 2015 because of a divorce or separation or as a result of a legal requirement.

a. The **amount** of child support paid in 2015 \$\_\_\_\_\_.

b. The **name(s)/ages of the children** for whom child support was paid in 2015.

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

c. The **name and address** of the person(s) to whom child support was paid

\_\_\_\_\_

\_\_\_\_\_

d. Signature of person that paid the child support in 2015

\_\_\_\_\_

## D. Spouse's Income Information

1.  I have already filed a 2015 U.S. Income Tax Return.

or

I am not required to file a 2015 U.S. Income Tax Return. (check box, answer a, b, or c) \*

a.  I was not employed in 2015.

b.  I was employed in 2015.

c.  I was employed in 2015 and was not issued a W-2(s). Indicate employer and explain why you were not issued a W-2(s).

Employer Name/Explanation: \_\_\_\_\_ Amount of income received: \$ \_\_\_\_\_

Employer Name/Explanation: \_\_\_\_\_ Amount of income received: \$ \_\_\_\_\_

Employer Name/Explanation: \_\_\_\_\_ Amount of income received: \$ \_\_\_\_\_

## E. Verification of Untaxed Income

You/spouse must complete all items in the chart. Write "0" for items that do not apply. DO NOT leave items blank.

<i>Untaxed Income</i>	<i>FAFSA Question 45 STUDENT/SPOUSE</i>
Child support received for all children in 2015. Don't include foster care or adoption payments.	\$
Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance of housing.	\$
Veteran's non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowance.	\$
Money received, or paid on your behalf (e.g. bills), not reported elsewhere on this form.	\$

## F. Sign this Worksheet

By signing this worksheet, we certify that all questions on this worksheet are answered and the information reported on this worksheet is correct.  
**WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

\_\_\_\_\_  
 Student signature Date  
**DO NOT USE COMPUTER FONT SIGNATURES**

\_\_\_\_\_  
 Spouse signature Date